

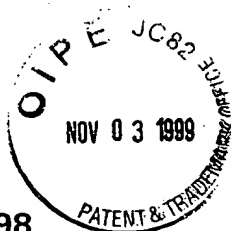
FILE COPY

In re Application of:

VIKTORS BERSTIS

Serial No. 09/404,398

Filed: SEPTEMBER 23, 1999

For: PERSONAL PRODUCT
LOCATOR ON STORE-OWNED
SHOPPING AID§
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§
§
§RECEIVED
JAN-4 2000
TC 2700 MAIL ROOM

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner of Patents
Washington, D.C. 20231

Sir:

Applicants hereby request that the Filing Receipt for the above-identified application be corrected to reflect the title of the invention as --PERSONAL PRODUCT LOCATOR ON STORE-OWNED SHOPPING AID--. The filing receipt incorrectly shows the title of the invention as PERSONAL PRODUCT LOCATOR ON STORE-OWENED SHOPPING AID.

Respectfully submitted,

Jack V. Musgrove
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CERTIFICATE OF MAILING

37 C.F.R. § 1.8(a)

I hereby certify this correspondence is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Assistant Commissioner of Patents, Washington, D.C. 20231 on 10/29/99.

FILING RECEIPT



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/404,398	09/23/99	2761	\$778.00	AT9-99-525	5	21	

ANDREW J DILLON
FELSMAN BRADLEY VADEN GUNTER & DILLON
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7600B NORTH CAPITAL OF TEXAS HIGHWAY
AUSTIN TX 78731

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) VIKTORS BERTIS, AUSTIN, TX.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/13/99
TITLE
PERSONAL PRODUCT LOCATOR ON STORE-OWNED SHOPPING AID
PRELIMINARY CLASS: 705

CC:WAPL

DATA ENTRY BY: MONROE, BEULAH

TEAM: 04 DATE: 10/13/99



(See reverse for new important information)

SERIAL NUMBER 09/404,398	FILING DATE 09/23/99	CLASS 705	GROUP ART UNIT 2761	ATTORNEY DOCKET NO. AT9-99-525
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APPLICANT

VIKTORS BERTIS, AUSTIN, TX.

RECEIVED
JAN - 4 2000
TC 2700 MAIL ROOM

CONTINUING DOMESTIC DATA***

VERIFIED

MMB TBP

371 (NAT'L STAGE) DATA***

VERIFIED

MMB TBP

FOREIGN APPLICATIONS***

VERIFIED

MMB TBP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/13/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>TBP</u> Examiner's Initials _____ Initials _____					

ADDRESS

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TITLE

PERSONAL PRODUCT LOCATOR ON STORE-OWNED SHOPPING AID

FILING FEE RECEIVED \$778	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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